

# VI Counter-Marketing

## Justification

Counter-marketing activities can promote smoking cessation and decrease the likelihood of initiation. In addition, counter-marketing messages can have a powerful influence on public support for tobacco control intervention and set a supportive climate for school and community efforts. Counter-marketing attempts to counter pro-tobacco influences and increase pro-health messages and influences throughout a State, region, or community. Counter-marketing consists of a wide range of efforts, including paid television, radio, billboard, and print counter-advertising at the State and local level; media advocacy and other public relations techniques using such tactics as press releases, local events, and health promotion activities; and efforts to reduce or replace tobacco industry sponsorship and promotions.

Tobacco advertising and promotion activities appear both to stimulate adult consumption and to increase the risk of youth initiation.<sup>1</sup> Children buy the most heavily advertised brands<sup>2</sup> and are three times more affected by advertising than are adults.<sup>3</sup> One study estimated that 34% of all youth experimentation with smoking in California between 1993 and 1996 can be attributed to tobacco promotional activities.<sup>4</sup> Today's average 14-year-old already has been exposed to more than \$20 billion in imagery advertising and promotions since age 6, creating a "friendly familiarity" with tobacco products<sup>5</sup> and an environment in which smoking is seen as glamorous, social, and normal.

In light of these ubiquitous and sustained pro-tobacco-use messages, counter-marketing efforts of comparable intensity are needed to alter the environmental context of tobacco use. The Fairness Doctrine campaign of 1967–1970—the only sustained nationwide tobacco control media effort to date—documented that an intensive mass media campaign can produce significant declines in both adult and youth smoking.<sup>6</sup> Statewide public education programs in California and Massachusetts that feature a variety of interventions, including paid media campaigns, have had the most

success in reducing tobacco use among adults, slowing the initiation of tobacco use among young people, and protecting children from exposure to secondhand tobacco smoke.<sup>7</sup> Multifaceted prevention programs such as the Minnesota Heart Health Program<sup>8</sup> and the University of Vermont School and Mass Media Project<sup>9</sup> show that comprehensive efforts that combine media, school-based, and community-based activities can postpone or prevent smoking in 20%–40% of adolescents. In just one year, a comprehensive prevention program financed by State settlement dollars and anchored by an aggressive mass media campaign produced significant declines in tobacco use among middle and high school students in Florida.<sup>10</sup>

Although the relative effectiveness of specific message concepts and strategies is widely debated, research from all available sources shows that counter-marketing must have sufficient reach, frequency, and duration to be successful.<sup>11</sup> The Vermont youth campaign, for example, exposed 50% of the target population to each TV and radio spot about six times each year over a 4-year period. This level of exposure is possible only through paid media placement.<sup>12</sup> In addition, effective counter-marketing efforts should

- Combine messages on prevention, cessation, and protection from secondhand smoke; target both young people and adults; and address both individual behaviors and public policies.
- Include grassroots promotions, local media advocacy, event sponsorships, and other community tie-ins to support and reinforce the statewide campaign.
- Maximize the number, variety, and novelty of messages and production styles rather than communicate a few messages repeatedly.
- Use nonauthoritarian appeals that avoid direct exhortations not to smoke and do not highlight a single theme, tagline, identifier, or sponsor.

## Budget

Currently there are three potential sources for airing tobacco control media messages at the national level: 1) the public service component of the Office of National Drug Control Policy's paid antidrug media campaign—but tobacco control spots are not guaranteed significant airtime; 2) the education campaign that will be conducted as part of the multi-State settlement—but the scope and timing of this campaign are still unknown; and 3) Philip Morris' youth prevention campaign—but the effectiveness of these messages in discouraging tobacco use among teens is unknown. Thus, despite these campaigns, States need to budget for State-directed counter-marketing campaigns addressing youth prevention, adult cessation, and protection of nonsmokers to ensure that all State residents will be exposed to messages that address the multiple goals of a comprehensive tobacco control program.

Funds may be competitively awarded to firms with experience in reaching culturally diverse audiences to integrate counter-marketing and public relations strategies in support of statewide and local programs. State lottery and

tourism agencies, which have extensive experience in managing advertising accounts, can help States develop strategic media plans. States may also want to contract with researchers for assistance in developing targeted messages and pretesting existing messages. At a minimum, \$1–\$3 per capita annually will fund a moderately intense counter-marketing campaign addressing all program goals in all major media markets in the State. Programs of greater intensity may be appropriate when specific population groups need to be targeted. The cost of ad placement will vary significantly across States and media markets. A new, high-quality TV spot commonly costs more than \$100,000 to develop. However, States can lower program development costs by using existing television, radio, print, and outdoor ads from CDC's Media Campaign Resource Center, a clearinghouse of high-quality materials produced by States and other organizations.

## Core Resources

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Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, Media Campaign Resource Center. Media Campaign Resource Books and Video Catalogs: Vol. I, 1995, and Vol. II, 1998. (<http://www.cdc.gov/tobacco/mcrc/index.htm>).

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## References

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- 9 Flynn BS, Worden JK, Secker-Walker RH, et al. Mass media and school interventions for cigarette smoking prevention: effects 2 years after completion. *Am J Public Health* 1994;84:1148–50.
- 10 Centers for Disease Control and Prevention. Tobacco use among middle and high school students—Florida, 1998 and 1999. *MMWR* 1999;48:248–53.
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- 12 Pechmann C. Does antismoking advertising combat underage smoking? A review of past practices and research. In: Goldberg ME, Fishbein M, Middlestadt SE, editors. Social marketing: theoretical and practical perspectives. Mahwah, NJ: Lawrence Erlbaum Associates, 1997:189–216.